

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 235667

FILED
Apr 30, 2009
Secretary of State

Entity Name: PLAYGROUND MUSIC CENTER, INC.

Current Principal Place of Business:

99 EGLIN PKWY
SUITE 1B
FT WALTON BCH, FL 32548 US

New Principal Place of Business:

Current Mailing Address:

99 EGLIN PKWY
SUITE 1B
FT WALTON BCH, FL 32548 US

New Mailing Address:

FEI Number: 59-6061887 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEONARD, ANTHONY D
128G ELM AVENUE
FORT WALTON BEACH, FL 32548 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEONARD, ANTHONY D
Address: 128G ELM AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: ST () Delete
Name: LEONARD, JAMES H
Address: 297 BRIARWOOD CIR
City-St-Zip: FORT WALTON BEACH, FL

Title: V () Delete
Name: ROCKWELL, ROBERT H
Address: 6 CHOCTAWHATCHEE NE
City-St-Zip: FORT WALTON BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: ROCKWELL, SHERRY
Address: 6 CHOCTAWHATCHEE NE
City-St-Zip: FORT WALTON BEACH, FL

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTHONY D LEONARD

P

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date